

1301 Central Street
Evanston, IL 60201
www.northshore.org

(847) 570-5065
(847) 570-5240 Fax

September 18, 2018

Ms. Courtney Avery
Illinois Health Facilities and Services Review Board
525 West Jefferson Street, 2nd Floor
Springfield, IL 62761

RECEIVED

SEP 21 2018

**HEALTH FACILITIES &
SERVICES REVIEW BOARD**

SUBJECT: Project #: 15-029 Highland Park Hospital
Annual Progress Report
Project Title: Highland Park Hospital Modernization of the existing OB related
beds and services. Discontinue 10 OB Beds.
Permit Holder: NorthShore University HealthSystem, 1301 Central, Evanston,
Illinois 60201

Dear Ms. Avery:

This is our 3rd annual progress report for the above project.

The scope and financing of the project remains as outlined in the CON Application approved by
the Illinois Health Facilities and Services Review Board.

Costs incurred through September 5, 2018 total \$15,219,066.62. The attached spreadsheet
outlines these costs by category and provides projections to the project's completion.

The project is on schedule to be complete by December 31, 2018.

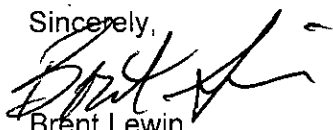
- Labor and Delivery - construction complete and occupied
- Canopy - construction complete and occupied
- C-Section Room - construction complete and occupied

The project remains on schedule as outlined in the application.

The required AIA forms G707s are attached.

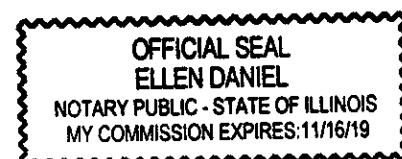
If we can provide you any further information at this time, please contact me at 847-570-5089 or
via e-mail at Blewin@northshore.org.

Sincerely,



Brent Lewin
Senior Director Accounting, Finance
NorthShore University Health System

State of Illinois
County of Cook
Signed before me on September 18, 2018
by Brent Lewin.
Ellen Daniel
Notary Public





Integrated Facilities Solutions, Inc.

September 12, 2018

Brent Lewin
Senior Director, Accounting, Finance Group
NorthShore University HealthSystem
1301 Central Street
Evanston, IL 60201

Subject: Annual progress report
Project: Highland Park Hospital - Modernization of the existing OB related beds
and services. Discontinue 10 OB Beds
CON Number: CON 15-029

Dear Mr. Lewin,

On behalf of NorthShore University HealthSystem, Integrated Facilities Solutions, Inc. (IFS) has reviewed the above project.

Based on the records provided by NorthShore, dated September 5, 2018 the actual costs paid to date on the above project is \$15,219,066.62 in direct project cost. The attached spreadsheet outlines the project costs by category. We have confirmed that the direct project cost of \$15,219,066.62 spent as of the above date are in agreement with IFS records.

The project is on schedule to be completed by December 31 2018.

- Labor and Delivery - construction complete and occupied
- Canopy - construction complete and occupied
- C-Section Room - construction complete and occupied

Sincerely,

Angelo Boncone
President
Integrated Facilities Solutions, Inc.





**Integrated
Facilities
Solutions, Inc.**

Project Number: 15-029
Project Title: 15-029 Highland Park Hospital: Modernization of the existing OB related beds and services. Discon
Subject: Annual C.O.N. Progress Report
Permit Holder: NorthShore University HealthSystem
Date: September 5, 2018

	Projected	Total Costs Incurred as of: 09/05/2018	Available Balance as of 09/05/2018	Estimated Costs to Completion	Variance From Approved
Preplanning Costs	\$ 212,000.00	\$ 208,686.08	\$ 3,313.92	\$ -	\$ 3,313.92
Site Survey & Soil Investigation	\$ 15,000.00		\$ 15,000.00	\$ -	\$ 15,000.00
Site Preparation	\$ 454,000.00	\$ 2,000.00	\$ 452,000.00	\$ -	\$ 452,000.00
Off-site Work	\$ 450,000.00		\$ 450,000.00	\$ -	\$ 450,000.00
New Construction Contracts	\$ 582,000.00	\$ 3,055,216.00	\$ (2,473,216.00)	\$ -	\$ (2,473,216.00)
Modernization Contracts	\$ 8,525,280.00	\$ 8,448,353.00	\$ 76,927.00	\$ 76,927.00	\$ -
Contingencies	\$ 286,340.00		\$ 286,340.00	\$ -	\$ 286,340.00
Architectural/Engineering Fees	\$ 907,000.00	\$ 1,009,900.87	\$ (102,900.87)	\$ -	\$ (102,900.87)
Consulting and Other Fees	\$ 665,000.00	\$ 550,425.58	\$ 114,574.42	\$ 66,000.00	\$ 48,574.42
Movable or Other Equipment	\$ 3,061,671.00	\$ 1,426,943.71	\$ 1,634,727.29	\$ 34,500.00	\$ 1,600,227.29
Other Costs to be Capitalized	\$ 815,000.00	\$ 517,541.38	\$ 297,458.62	\$ 15,000.00	\$ 282,458.62
Total	\$ 15,973,291.00	\$ 15,219,066.62	\$ 754,224.38	\$ 192,427.00	\$ 561,797.38

Cash and Securities \$ 15,973,291.00
Pledges
Gifts and Bequests
Bond Issues (project related)
Mortgages
Leases (fair market value)
Governmental Appropriations
Grants
Other Funds and Sources
TOTAL FUNDS \$ 15,973,291.00

APPLICATION AND CERTIFICATE FOR PAYMENT

PAGE 1 OF 3 PAGES

TO OWNER: Northshore University HealthSystem

PROJECT: Highland Park Hospital Women's Center - P1

2650 Ridge Avenue
Evanston, IL
60201-0000

2650 Ridge Avenue
Evanston, IL
60201-0000 US

APPLICATION NO.:14

PERIOD TO :30-JUN-16

PROJECT NOS.:1401531

INVOICE NO.1401531014

CONTRACT DATE :20-AUG-14

Distribution to:

☐ OWNER
☐ ARCHITECT
☐ CONTRACTOR
☐

FROM CONTRACTOR: Pepper Construction Company
411 Lake Zurich Road
Barrington, IL, 60010-3141

ARCHITECT:

CONTRACT FOR: Highland Park Hospital Women's Center - P

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for payment, as shown below, in connection with the Contract. Continuation sheet is attached.

1. ORIGINAL CONTRACT SUM \$ 2,648,142.00
2. Net change by change orders \$ 218,033.00
3. CONTRACT SUM TO DATE (Line1 +/- 2) \$ 2,866,175.00
4. TOTAL COMPLETED & STORED TO DATE \$ 2,866,175.00
(Column G on G703)
5. RETAINAGE:
Total retainage Column I of G703) \$ 0.00
6. TOTAL EARNED LESS RETAINAGE \$ 2,866,175.00
(Line 4 less Line 5 Total)
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT
(Line 6 from prior Certificate) \$ 2,719,917.76
8. CURRENT PAYMENT DUE \$ 146,257.24
9. BALANCE TO FINISH, INCLUDING RETAINAGE .
(Line 3 less Line 6) \$ 0.00

CHANGE ORDER SUMMARY		ADDITIONS	DEDUCTIONS
Change Order approved in previous months by Owner		210,750.04	-0.04
APPROVED THIS MONTH			
Number	Date Approved		
0000004	22-APR-2016	7,283.00	
CURRENT TOTAL		7,283.00	0.00
Net Change by Change Orders			218,033.00

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates for payment were issued and payments received from the Owner, and that current payment shown herein is now due.

Contractor : Pepper Construction Company

By: PR Date: 6/22/16

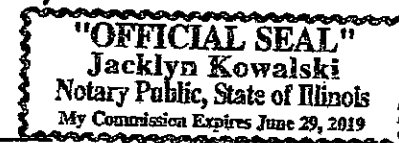
State of: _____

County of: _____

Subscribed and sworn to before me this _____ day of _____

Notary Public: Jacklyn Kowalski

My Commission expires: _____



ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising the above application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated, the quality of Work is in accordance with the Contract Documents, and the Contractor is entitled to the payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED.....\$ 146,257.24
(Attach explanation if amount certified differs from the amount applied for. Initial figures on this Application and on the Continuation Sheet that are changed to conform to the amount certified.)

ARCHITECT: [Signature] Date: 6/29/2016
By: [Signature] Date: 6/29/2016
This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

APPLICATION AND CERTIFICATE FOR PAYMENT

PAGE 1 OF 4 PAGES

TO OWNER: Northshore University HealthSystem

2650 Ridge Avenue
Evanston, IL
60201

PROJECT: NUH - Highland Park Hospital Canopy & Common Area Improvement

2650 Ridge Avenue
Evanston, IL
60201-0000 US

APPLICATION NO.: 19

PERIOD TO: 31-DEC-17

PROJECT NOS.: 1401889

INVOICE NO.: 1401889019

CONTRACT DATE: 10-FEB-15

Distribution to:

☐ OWNER
☐ ARCHITECT
☐ CONTRACTOR
☐
☐

FROM CONTRACTOR: Pepper Construction Company

411 Lake Zurich Road
Barrington, IL, 60010-3141

ARCHITECT:

CONTRACT FOR: NUH - Highland Park Hospital Canopy & Co

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for payment, as shown below, in connection with the Contract. Continuation sheet is attached.

1. ORIGINAL CONTRACT SUM \$ 2,887,777.00
2. Net change by change orders \$ 167,439.00
3. CONTRACT SUM TO DATE (Line1 +/- 2) \$ 3,055,216.00
4. TOTAL COMPLETED & STORED TO DATE \$ 3,055,216.00
(Column G on G703)
5. RETAINAGE:
Total retainage Column I of G703) \$ 0.00
6. TOTAL EARNED LESS RETAINAGE \$ 3,055,216.00
(Line 4 less Line 5 Total)
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT
(Line 6 from prior Certificate) \$ 2,839,606.62
8. CURRENT PAYMENT DUE \$ 215,609.38
9. BALANCE TO FINISH, INCLUDING RETAINAGE .
(Line 3 less Line 6) \$ 0.00

CHANGE ORDER SUMMARY		ADDITIONS	DEDUCTIONS
Change Order approved in previous months by Owner		191,004.00	-23,565.00
APPROVED THIS MONTH			
Number	Date Approved		
CURRENT TOTAL		0.00	0.00
Net Change by Change Orders			167,439.00

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates for payment were issued and payments received from the Owner, and that current payment shown herein is now due.

Contractor : Pepper Construction Company

By: [Signature] Date: 12-20-17

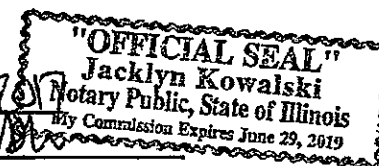
State of: Illinois

County of: COOK

Subscribed and sworn to before me this 20 day of December 2017

Notary Public: Jacklyn Kowalski

My Commission expires: 6/29/19



ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising the above application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated, the quality of Work is in accordance with the Contract Documents, and the Contractor is entitled to the payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED.....\$ 215,609.38

(Attach explanation if amount certified differs from the amount applied for. Initial figures on this Application and on the Continuation Sheet that are changed to conform to the amount certified.)

ARCHITECT:

By: [Signature] Date: 12/21/2017

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

APPLICATION AND CERTIFICATE FOR PAYMENT

PAGE 1 OF 4 PAGES

TO OWNER: Northshore University HealthSystem

PROJECT: NUH - Highland Park Hospital LDRP Renov Phase 2 - 5

2650 Ridge Avenue
Evanston, IL
60201

2650 Ridge Avenue
Evanston, IL
60201-0000 US

APPLICATION NO.:27

PERIOD TO :28-FEB-18

PROJECT NOS.:1401890

INVOICE NO.1401890027

CONTRACT DATE :10-FEB-15

Distribution to:

☐ OWNER
☐ ARCHITECT
☐ CONTRACTOR
☐
☐

FROM CONTRACTOR: Pepper Construction Company
411 Lake Zurich Road
Barrington, IL, 80010-3141

ARCHITECT:

CONTRACT FOR: NUH - Highland Park Hospital LDRP Renov

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for payment, as shown below, in connection with the Contract. Continuation sheet is attached.

1. ORIGINAL CONTRACT SUM \$ 5,010,360.00
2. Net change by change orders \$ 538,062.00
3. CONTRACT SUM TO DATE (Line1 +/- 2) \$ 5,548,422.00
4. TOTAL COMPLETED & STORED TO DATE \$ 5,548,422.00
(Column G on G703)
5. RETAINAGE:
Total retainage Column I of G703) \$ 0.00
6. TOTAL EARNED LESS RETAINAGE \$ 5,548,422.00
(Line 4 less Line 5 Total)
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT
(Line 6 from prior Certificate) \$ 5,359,740.89
8. CURRENT PAYMENT DUE \$ 188,681.11
9. BALANCE TO FINISH, INCLUDING RETAINAGE .
(Line 3 less Line 6) \$ 0.00

CHANGE ORDER SUMMARY		ADDITIONS	DEDUCTIONS
Change Order approved in previous months by Owner		538,062.00	0.00
APPROVED THIS MONTH			
Number	Date Approved		
CURRENT TOTAL		0.00	0.00
Net Change by Change Orders			538,062.00

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates for payment were issued and payments received from the Owner, and that current payment shown herein is now due.

Contractor: Pepper Construction Company

By: [Signature] Date: 2-21-18

State of: Illinois

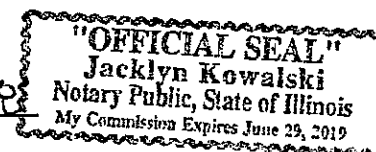
County of: COOK

Subscribed and sworn to before

me this 21 day of February 2018

Notary Public: Jacklyn Kowalski

My Commission expires: 6/29/19



ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising the above application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated, the quality of Work is in accordance with the Contract Documents, and the Contractor is entitled to the payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED.....\$ 188,681.11

(Attach explanation if amount certified differs from the amount applied for. Initial figures on this Application and on the Continuation Sheet that are changed to conform to the amount certified.)

ARCHITECT:

By: [Signature] Date: 2/21/2018

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.